

Electronic Filing System (EFS) Data
Electronic Patent Application Submission
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EFS ID: 11602
Application ID: 09681803
Title of Invention: Curing of a Gel Coat on a Mold
First Named Inventor: Larry Crump
Domestic/Foreign Application: Domestic Application
Filing Date: null
Effective Receipt Date: 2001-06-07
Submission Type: Utility Patent Filing
Filing Type: new-utility
Confirmation Number: 0
Attorney Docket Number: CCP-3358(1)
Digital Certificate Holder: cn=Gary R. Plotecher, ou=Registered Attorneys, ou=Patent and Trademark Office, ou=Department of Commerce, o=U.S. Government, c=US
Certificate Message Digest: zXeZHfb5Ls5Yqt45qnXZ9A==
Total Fees Authorized: \$1020.0
Payment Category: DA - Deposit Account
Deposit Account Number: 232053
Deposit Account Name: Gary R. Plotecher



09681803-060701

TRANSMITTAL FORM



Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number: CCP-3358(1)

Curing of a Gel Coat on a Mold

First Named Inventor: Larry Scott Crump

SUBMITTED BY

Name: Gary R. Plotecher
 Registration Number: 27830
 Electronic Signature Mark: /grp Date Signed: 20010607

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I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

bibd-transmittal	CCP3358apds.xml
fee-transmittal	CCP3358fee.xml
patent-assignment	CCP3358asgn.xml
specification	CCP3358appl.xml
declaration	CCPdecl1.tif
declaration	CCPdecl2.tif
declaration	CCPdecl3.tif

Attached Image File(s):

20010607 09/681803 1c474 U.S. PTO

CCPdecl1.tif

CCPdecl2.tif

CCPdecl3.tif

20030323160

Comments:

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PTO/SB/01 (12-87)

Approved for use through 9/30/00, OMB 0651-0032
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	CCP-3358(1)
	First Named Inventor	Crump, Larry Scott
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Curing of a Gel Coat on a Mold

the specification of which (Title of the Invention)

☒ is attached hereto
OR
☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 358(b) of any foreign application(s) for patent or inventor's certificate, or 358(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(a) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/215,058	06/29/2000	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 35(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 022202 OR ☐ Registered practitioner(s) name/registration number listed below

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Number Bar Code
Label Here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 022202 OR ☐ Correspondence address below

Name			
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any)) Larry Scott Family Name or Surname Crump

Inventor's Signature	<u>L. Scott Crump</u>		Date	<u>6/5/01</u>	
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Post Office Address					
City	<u>Gladstone</u>	State	<u>MO</u>	ZIP	<u>64118</u>
			Country	<u>USA</u>	

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

(Page 2 of 2)

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DECLARATION

ADDITIONAL INVENTOR(S)
 Supplemental Sheet
 Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Therese E.		Feess	
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Mailing Address			
City Mission	State KS	ZIP 66202	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Erwoan		Pezron	
Inventor's Signature <i>[Signature]</i>		Date <u>6/5/2001</u>	
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City Prairie Village	State KS	ZIP 66208	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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2006-03-03 10:00:00

FEE TRANSMITTAL

Electronic Version 1.0.4

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Patent fees are subject to annual revisions on or about October 1st of each year.

Large Entity

TOTAL FEES AUTHORIZED: \$ 1020

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number: 23-2053



Deposit Account Name: Whyte Hirschboeck Dudek S.C.

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

SUBMITTED BY

Authorized Name: Gary R. Plotecher

Electronic Signature Mark: /grp

Date Signed: 20010607

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	101	\$ 710

Subtotal For Basic Filing Fee: \$ 710

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 35	103	\$ 18	15	\$ 270
Independent Claims: 2	102	\$ 80	0	\$ 0

Subtotal For Extra Claims Fees: \$ 270

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CCP3358

ADDITIONAL FEES

Fee Description	Fee Code	Fee Paid
Recording Each Patent Assignment Per Property Fee	581	\$ 40

Subtotal For Additional Fees: \$ 40

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